



OF COVERAGE UNDER THE SAN BERNARDINO COUNTY MUNICIPAL STORMWATER PERMIT FOR STORMWATER DISCHARGES ASSOCIATED WITH CONSTRUCTION ACTIVITY

ORDER No. R8-2010-0036 (NPDES No. CAS618036)

I. WDID No					
II. OWNER					
Name	Contac	Contact Person			
Mailing Address	Title	Title			
City	State	Zip	Phone (Fax (Email:) –	
III. SITE INFORMATION	•	•			
A. Original Project Title	Site Ac	Site Address			
City/Un-incorporated Area	State CA	Zip	Site Conta	act Person	
B. Contractor Name	Phone Fax Email:	, ,		Title	
Local Mailing Address	City		State	Zip	
Qualified SWPPP Practitioner	Phone Fax Email:				
IV. BASIS OF TERMINATION	ntion Plan h posed of pro er management the location he report) pe illy or i ntion Plan h posed of pro trontrol is er managen	ave been completed. operly. nent requirements. plan is in place (Attacks of the PCBMPs). orformed on// ndefinitely and the ave been completed. operly. in place for all denuded	by Name following conditions	have been met.	
I certify under penalty of law that all storm water discharges associated of General Permit No. CAS000002 have been eliminated or that I am no lo Termination, I am no longer authorized to discharge storm water associate pollutants in storm water associated with construction activity to waters of is not authorized by a NPDES permit. I also understand that the submitt violation of the General Permit or the Clean Water Act. Printed Name:	nger the ow ated with co of the United	ner of the site. I unders nstruction activity under d States is unlawful und otice of Termination doe	stand that by submit the General Permit er the Clean Water es not release an ow	ting this Notice of t, and that discharging Act where the discharge	
Signature:		Date:			